2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 17, 2006 08:00 AM
Secretary of State

DOCUMENT # 362345

1. Entity Name
LEITZ MUSIC COMPANY, INC.

Principal Place of Business	Mailing Address
508 HARRISON AVENUE PANAMA CITY, FL 32401	508 HARRISON AVENUE PANAMA CITY, FL 32401

DO NOT WRITE IN THIS SPACE

02232006 No Chg-P CR2E034 (11/05)

4. FEI Number
59-1308767

☐ Applied For
☐ Not Applicable

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent

LEITZ, PHILIP
8134 CLUSTER ROAD
PANAMA CITY, FL 32404

DO NOT WRITE IN THIS SPACE

8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent.

SIGNATURE: Philip Leitz 4-13-06
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE

FILE NOW!!! FEE IS $150.00
After May 1, 2006 Fee will be $550.00

9. Election Campaign Financing Trust Fund Contribution. ☐ **$5.00** May Be Added to Fees

10. OFFICERS AND DIRECTORS

TITLE	S
NAME	LEITZ, HONEY W MS
STREET ADDRESS	1405 E 2ND CT
CITY-ST-ZIP	PANAMA CITY, FL 32401
TITLE	C
NAME	LEITZ, JULIE MRS
STREET ADDRESS	8134 CLUSTER RD.
CITY-ST-ZIP	PANAMA CITY, FL 32404
TITLE	P
NAME	LEITZ, PHILIP MR
STREET ADDRESS	8134 CLUSTER ROAD
CITY-ST-ZIP	PANAMA CITY, FL 32404
TITLE	T
NAME	BRAMLETT, KEVIN MR
STREET ADDRESS	1211 CHRISTEL AVENUE
CITY-ST-ZIP	PANAMA CITY, FL 32401
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

U00000511122
04/29/06-80095-006 150.00

DO NOT WRITE IN THIS SPACE

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: Philip Leitz 4-13-06 850 769-0111
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #